2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # V35740

1. Entity Name
I & E INVESTMENT CORPORATION

Principal Place of Business	Mailing Address
% EUGENIA ROSEN 2751 SOUTH OCEAN DRIVE, APT. 1105 SOUTH HOLLYWOOD, FL 33019 US	% EUGENIA ROSEN 2751 SOUTH OCEAN DRIVE, APT. 1105 SOUTH HOLLYWOOD, FL 33019 US

02212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0332420
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSEN, ISAAC
2751 SOUTH OCEAN DRIVE
APT 1105 SOUTH
HOLLYWOOD, FL 33019

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000446998
03/08/06-80033-006 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ROSEN, ISAAC
STREET ADDRESS	2751 S OCEAN DR APT 1105 S
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	S
NAME	ROSEN, EUGENIA
STREET ADDRESS	2751 S OCEAN DR APT 1105 S
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eugenia Rosen Vice Secretary/Treas 2/21/06 954-921-938
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #